Entity Name: FRIENDS OF THE LOWER SUWANNEE AND CEDAR KEYS	
NATIONAL WILDLIFE REFUGES, INC.	

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

16450 NW 31ST PL CHIEFLAND, FL 32626

Current Mailing Address:

P O BOX 532 CEDAR KEY, FL 32625 US

DOCUMENT# N0200001335

FEI Number: 59-3718472

Name and Address of Current Registered Agent:

CAGLE, LIBBY 6890 WS 103RD TERR CEDAR KEY, FL 32625 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE				01/25/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	DIRECTOR	Title	SECRETARY		
Name	HALL, PEG	Name	MCPHERSON, JOHN ESQ.		
Address	5123 NW 75TH LANE	Address	PO BOX 921		
City-State-Zip:	GAINESVILLE FL 32653	City-State-Zip:	CEDAR KEY FL 32625		
Title	PRESIDENT	Title	TREA		
Name	LANG , GREG	Name	CAGLE, LIBBY		
Address	s P.O. BOX 578 LANG , GREG 110 NE10TH AVENUE APT. D	Address	6890 SW 103RD TERR		
		City-State-Zip:	CEDAR KEY FL 32625		
City-State-Zip:	GAINESVILLE FL 32601	Title	PRESIDENT ELECT		
Title	DIRECTOR	Name	SGAMBATI, MARIA		
Name	THALACKER, JOHN	Address	PO BOX 962		
Address	P. O. BOX 254	City-State-Zip:	CEDAR KEY FL 32625		
City-State-Zip:	CEDAR KEY 32625				

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LIBBY CAGLE

TREASURER

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date